

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Docket No.: PFLUG

In re PATENT Application of:

RAINER PFLUG et al.

Appl. No.: 09/754,618

Filed: January 4, 2001

For: THRUST BALL BEARING

) Examiner: Sy, Mariano Ong

) Group Art Unit: 3683

NOTICE OF APPEAL TO
THE BOARD OF PATENT APPEALS AND INTERFERENCES

MAIL STOP AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

S I R:

Applicant hereby appeals to the Board of Patent Appeals and Interferences
from the decision dated November 2, 2005 of the Examiner finally rejecting claims
1-13. Accompanying the Notice of Appeal is a Request for a Panel Review.

I hereby certify that this correspondence is being deposited with the
United States Postal Service with sufficient postage as first class mail in
an envelope addressed to "Commissioner for Patents, P.O. Box 1450,
Alexandria, VA 22313-1450", on January 19, 2006.

(Date)

HENRY M. FEIEREISEN

Name of Registered Representative

Signature

Date of Signature

01/24/2006 MWOLDGE1 00000003 09754618

01 FC:1401

500.00 OP

The items checked below are appropriate:

1. STATUS OF APPLICANT

This application is on behalf of

☒ other than small entity

☐ small entity

Verified Statement

☐ attached

☐ already filed on _____

2. FEE FOR FILING NOTICE OF APPEAL

Persuant to 37 C.F.R. 1.17(e) the fee for filing the Notice of Appeal is

☐ small entity \$250.00

☒ other than a small entity \$500.00

Notice of Appeal Fee due \$500.00

3. EXTENSION OF TERM

a. ☐ The Commissioner is hereby petitioned to extend the period for response to above-referenced Official Action by _____ months until _____. Accompanying this amendment is the appropriate fee of \$ _____ pursuant to 37 C.F.R. §1.17(c) and 37 C.F.R. §1.136(a).

b. ☐ Request for Extension of Time was filed on _____ together with a Request for Reconsideration, and the appropriate fee of \$ _____ was paid.

4. TOTAL FEE DUE

The total fee due is

Notice of Appeal fee \$500.00

Extension fee (if any) \$ _____

TOTAL FEE DUE \$500.00

5. FEE PAYMENT

☒ Attached is a check in the sum of \$500.00.

☐ Please charge the fee to Deposit Account No.06-0502.

6. FEE DEFICIENCY

- (X) The Commissioner is hereby authorized to charge payment of any additional fees which may be required with this communication, or credit any overpayment to Deposit Account No. 06-0502. Two copies of this sheet are provided for this purpose.

Respectfully submitted,

By: 

Henry M. Feiereisen
Reg. No.: 31,084
Agent for Applicant

Date: January 19, 2006
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